

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Christopher Brennan
Name

(2) 2721 NE 14th Street
Address (number and street)
Fort Lauderdale FL 33304
City, State, Zip Code

☐ Check here if address has changed

(3) ID Number: _____

OFFICE USE ONLY

2015 JAN 22 PM 5:02

CITY CLERK

(4) Check appropriate box(es):

☒ Candidate Office Sought: Mayor

☐ Political Committee (PC)

☐ Electioneering Communications Org. (ECO)

☐ Party Executive Committee (PTY)

☐ Independent Expenditure (IE) (also covers an individual making electioneering communications)

☐ Check here if PC or ECO has disbanded

☐ Check here if PTY has disbanded

☐ Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 1 / 7 / 15 To 1 / 9 / 15 Report Type: _____

☐ Original

☐ Amendment

☐ Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____

Loans \$ _____ 460.00

Total Monetary \$ _____

In-Kind \$ _____

(7) Expenditures This Report

Monetary Expenditures \$ _____ 450.00

Transfers to Office Account \$ _____

Total Monetary \$ _____

(8) Other Distributions

\$ _____

(9) TOTAL Monetary Contributions To Date

\$ _____ 460.00

(10) TOTAL Monetary Expenditures To Date

\$ _____ 450.00

(11) Certification

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

I certify that I have examined this report and it is true, correct, and complete:

(Type name) Christopher Brennan

☐ Individual (only for IE or electioneering comm.) ☒ Treasurer ☐ Deputy Treasurer

X C. Brennan
Signature

(Type name) Christopher Brennan

☒ Candidate ☐ Chairperson (only for PC and PTY)

X C. Brennan
Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name Christopher Brenner (2) I.D. Number _____

(3) Cover Period 1 / 7 / 15 through 1 / 9 / 15 (4) Page 1 of 1

[illegible]

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Christopher Brennan

(2) I.D. Number _____

(3) Cover Period 1, 7, 15 through 1, 9, 15

(4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
1/17/15	City of Fort Lauderdale 100 N Andrews AVE Fort Lauderdale FL 33301	Qualifying Assessment Fees	MON		\$450
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